Sick children at home

More and more very sick children are being cared for with their families at home. Anna Sidey talked to Nursing Standard about the nursing skills necessary for this demanding work.

Children, whether sick or well, fare best when they are at home with their parents, siblings and extended families. Over the past decade, more and more children have been cared for at home but, inevitably, those children with less severe illness have benefited most.

Home care for children with skin conditions, for example, and for those undergoing routine surgery or suffering from some medical conditions is now regarded as routine. Added to these in recent years have been children suffering from what were once regarded as serious disorders, such as neurological, malignant or metabolic problems, and children who have congenital disorders, such as cystic fibrosis.

The benefits
Anna Sidey, lecturer in community children's nursing at University College in Northampton, believes the benefits of managing a child’s care at home are manifold.

'The child will be in familiar and secure surroundings, be able to maintain a normal social routine and may be able to attend school, at least for part of the time,' she says. 'In my experience, parents are built in carers and most homes are suitable for caring or can be adapted.'

Caring for sick children in the relatively isolated environment of their home requires a contribution from a wide range of agencies: the family doctor must be aware of the child's care programme and must liaise closely with hospital medical colleagues; nurses will visit the home; local authority staff often provide equipment and may provide respite care, teachers will be involved the child's educational development.

'Despite the extensive teamwork which is necessary, it is often nurses who liaise with and co-ordinate the work of the team members in the interests of the child and family,' says Ms Sidey.

Training and experience
Nurses caring for children at home are qualified children's nurses and are usually experienced in a range of clinical specialties. Many of these nurses will have a community nursing qualification, such as health visiting and ideally a degree with a specialist children's element.

'Maintaining close links with the hospital ward or clinic is vital, especially if the child would normally have been cared for in hospital, has been discharged early or is suffering from a chronic condition that is likely to require readmission,' says Ms Sidey. 'Unfortunately, those services may be inconsistent because children’s needs are not adequately represented to managers.'

Family support
A large part of the nurse’s role in caring for these children lies in supporting and educating parents and other family members. Nurses must appreciate the great stress imposed by having a very sick child in the family and the adjustments that all members must make in accommodating the child.

For parents in particular, understanding the implications of the child’s illness and the likely outcome of treatment and having confidence in their own caring skills are essential prerequisites for caring at home.

As Ms Sidey says: 'The opportunity to care for their child mainly at home instead of in hospital can be a source of great comfort to parents. Nurses must ensure parents have access to a 24-hour children’s nursing service, planned respite care, a key worker and appropriate equipment and supplies.'

Key issues in children's home care

Successful home care for children involves:

- Expert nursing care.
- Key working.
- Team co-ordination.
- Parent support.
- Adequate provision of professional training.